

Appendix 5
Off-Site Shipment of Site Generated Wastes

**Massachusetts Department of Environmental Protection****BWSC-012A**

Bureau of Waste Site Cleanup

BILL OF LADING (pursuant to 310 CMR 40.0030)

Release Tracking Number*

☐ - ☐ N/A**LOCATION OF SITE OR DISPOSAL SITE WHERE REMEDIATION WASTE WAS GENERATED:**

Release Name (optional):

Street: 300 Canal Street

Location Aid: _____

City/Town: LawrenceZIP Code: 01840 -- _____Date/Period of Generation: 7 / 18 / 03 to 8 / 18 / 03

Additional Release Tracking Numbers Associated with this Bill of Lading: _____

*Note: If this Bill of Lading is the result of a Limited Removal Action (LRA) taken prior to Notification, a Release Tracking Number is not needed.

B. PERSON CONDUCTING RESPONSE ACTION ASSOCIATED WITH BILL OF LADING:Name of Organization: Clean Harbors of Andover, LLCName of Contact: Jean SoltysTitle: Sr. Compliance ManagerStreet: 221 Sutton StreetCity/Town: North AndoverState: MAZip Code: 01845 -- _____Telephone: 987 -- 683 -- 1002 Ext. _____**C. RELATIONSHIP TO RELEASE OR THREAT OF RELEASE OF PERSON CONDUCTING RESPONSE ACTION ASSOCIATED WITH BILL OF LADING:**

(check one/specify)

☒ RP Specify (circle one): ☒ Owner ☐ Operator ☐ Generator ☐ Transporter ☐ Other RP: _____☐ PRP Specify (circle one): ☐ Owner ☐ Operator ☐ Generator ☐ Transporter ☐ Other PRP: _____☐ Fiduciary/Secured Lender☐ Agency/Public Utility on a Right of Way☐ Other Person: _____

If an owner and/or operator is not conducting the response action associated with the Bill of Lading, provide on an attachment the name, contact person, address and telephone number, including any area code and extension, for each, if known.

D. TRANSPORTER/COMMON CARRIER INFORMATION:Transporter/Common Carrier Name: Clean Harbors Environmental, Inc.Contact Person: Kevin RealiniTitle: Logistics CoordinationStreet: 1 Hill AvenueCity/Town: BraintreeState: MAZip Code: 02184 -- _____Telephone: 781 -- 849 -- 1807 Ext.: _____**E. RECEIVING FACILITY/TEMPORARY STORAGE LOCATION:**Operator/Facility Name: Clean Harbors of BaltimoreContact Person: Steve VenteTitle: Facility ManagerStreet: 1910 Russell StreetCity/Town: BaltimoreState: MDZip Code: 21230 -- _____Telephone: 410 -- 244 -- 8200 Ext.: _____

Type of Facility:

☐ Asphalt Batch/Cold Mix☐ Landfill/Disposal☐ Incinerator

(check one)

☐ Asphalt Batch/Hot Mix☐ Landfill/Daily Cover☐ Temporary Storage☐ Thermal Processing☐ Landfill/Structural Fill☒ Other: TSDf

Division of Hazardous

Waste/Class A Permit #: A-151

Division of Solid Waste

Management Permit #: _____

EPA Identification #: MDD 980555189

Anticipated Period of Temporary Storage (specify dates if applicable): _____ / _____ / _____ to _____ / _____ / _____

Reason for Temporary Storage (if applicable): _____



Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-012A

Release Tracking Number

☐ - ☐ N/A

BILL OF LADING (pursuant to 310 CMR 40.0030)

E. RECEIVING FACILITY/TEMPORARY STORAGE LOCATION (continued):

Temporary Storage Address:

Street: _____

City/Town: _____ State: _____ Zip Code: _____ -- _____

F. DESCRIPTION OF REMEDIATION WASTE:

(check all that apply)

☒ Contaminated Media (circle all that apply): ☒ Soil ☐ Groundwater ☐ Surface Water ☐ Other: _____

☒ Contaminated Debris (circle all that apply): ☒ Demolition/Construction Waste ☐ Vegetation/Organic Materials

☐ Inorganic Absorbent Materials

Other: _____

☐ Non-hazardous Uncontainerized Waste (circle all that apply): ☐ Non-aqueous Phase Liquid ☐ Other: _____

☐ Non-hazardous Containerized Waste (circle all that apply): ☐ Tank Bottoms/Sludges ☐ Containers ☐ Drums

☐ Engineered Impoundments

Other: _____

Type of Contamination (circle all that apply): ☐ Gasoline ☐ Diesel Fuel ☐ #2 Oil ☐ #4 Oil ☐ #6 Oil ☐ Waste Oil

☐ Kerosene

☐ Jet Fuel

Other: _____

Estimated Volume of Materials: ☐ Cubic Yards: _____ ☐ Tons: _____ ☐ Other: _____

Contaminant Source (check one/specify): ☐ Transportation Accident ☐ Underground Storage Tank ☐ Other: _____

Response Action Associated with Bill of Lading (circle one): ☐ Immediate Response Action ☐ Release Abatement Measure

☐ Utility-Related Abatement Measure

☐ Limited Removal Action (LRA)

☐ Comprehensive Response Action

Other (specify): _____

Remediation Waste Characterization Support Documentation attached:

☐ Site History Information ☐ Sampling and Analytical Methods and Procedures ☒ Laboratory Data ☐ Field Screening Data

If supporting documentation is not appended, provide an attachment stating the date and in connection with what document such information was previously submitted to DEP.

G. LICENSED SITE PROFESSIONAL (LSP) OPINION:

Name of Organization: URS Corporation

LSP Name: Gary Garfield Title: Director of Engineering

Telephone: 603 -- 893 -- 0616 Ext. 2231

I attest that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this submittal, and in my professional opinion and judgement based upon application of

the standard of care in 309 CMR 4.02(1),

(ii) the applicable provisions of 309 CMR 4.02(2) and (3), and

(iii) the provisions of 309 CMR 4.03(5),

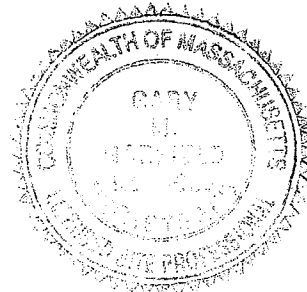
to the best of my knowledge, information and belief, the assessment actions undertaken to characterize the Remediation Waste which is (are) the subject of this submittal for acceptance at the facility identified in this submittal comply with the applicable provisions of 310 CMR 40.0000, and such facility is permitted to accept Remediation Waste having the characteristics described in this submittal. I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

Signature: *Gary Garfield*

Seal:

Date: 8 / 19 / 03

License Number: 9658





Massachusetts Department of Environmental Protection
Bureau of Waste Site Cleanup

BWSC-012A

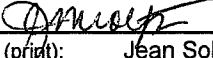
Release Tracking Number

☐ - ☐ N/A

BILL OF LADING (pursuant to 310 CMR 40.0030)

**H. CERTIFICATION OF PERSON CONDUCTING RESPONSE ACTION ASSOCIATED WITH THIS
BILL OF LADING:**

I certify under penalties of law that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained herein is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for wilfully submitting false, inaccurate, or incomplete information.

Signature: 
Name of Person (print): Jean Soltys

Date: 8 / 19 / 03

**Massachusetts Department of Environmental Protection****BWSC-012B**

Bureau of Waste Site Cleanup

BILL OF LADING (pursuant to 310 CMR 40.0030)

Release Tracking Number

LOG SHEET 1 OF 1☐ - N/A**I. LOAD INFORMATION:**

LOAD 1: Signature of Transporter Representative:

Date of Shipment:

Time of Shipment:

08/21/03

09:00

(circle one) am/pm

Truck/Tractor Registration:

Trailer Registration (if any):

PDX8218 OH

T306760 IL

Receiving Facility/Temporary Storage Representative:

* Mikayla Wade

Date of Receipt:

Time of Receipt:

* 9/02/03

* 1200:

(circle one) am/pm

Load Size (cu. yds./tons):

LOAD 2: Signature of Transporter Representative:

Date of Shipment:

Time of Shipment:

8/25/03

14:00

(circle one) am/pm

Truck/Tractor Registration:

Trailer Registration (if any):

AF 61118 PA

PU 6623 OH

Receiving Facility/Temporary Storage Representative:

Date of Receipt:

Time of Receipt:

1/1/

:

(circle one) am/pm

Load Size (cu. yds./tons):

LOAD 3: Signature of Transporter Representative:

Date of Shipment:

Time of Shipment:

/ /

:

(circle one) am/pm

Truck/Tractor Registration:

Trailer Registration (if any):

Receiving Facility/Temporary Storage Representative:

Date of Receipt:

Time of Receipt:

/ /

:

(circle one) am/pm

Load Size (cu. yds./tons):

LOAD 4: Signature of Transporter Representative:

Date of Shipment:

Time of Shipment:

/ /

:

(circle one) am/pm

Truck/Tractor Registration:

Trailer Registration (if any):

Receiving Facility/Temporary Storage Representative:

Date of Receipt:

Time of Receipt:

/ /

:

(circle one) am/pm

Load Size (cu. yds./tons):

LOAD 5: Signature of Transporter Representative:

Date of Shipment:

Time of Shipment:

/ /

:

(circle one) am/pm

Truck/Tractor Registration:

Trailer Registration (if any):

Receiving Facility/Temporary Storage Representative:

Date of Receipt:

Time of Receipt:

/ /

:

(circle one) am/pm

Load Size (cu. yds./tons):

LOAD 6: Signature of Transporter Representative:

Date of Shipment:

Time of Shipment:

/ /

:

(circle one) am/pm

Truck/Tractor Registration:

Trailer Registration (if any):

Receiving Facility/Temporary Storage Representative:

Date of Receipt:

Time of Receipt:

/ /

:

(circle one) am/pm

Load Size (cu. yds./tons):

LOAD 7: Signature of Transporter Representative:

Date of Shipment:

Time of Shipment:

/ /

:

(circle one) am/pm

Truck/Tractor Registration:

Trailer Registration (if any):

Receiving Facility/Temporary Storage Representative:

Date of Receipt:

Time of Receipt:

/ /

:

(circle one) am/pm

Load Size (cu. yds./tons):

J. LOG SHEET VOLUME INFORMATION:

Total Volume This Page (cu. yds./tons):

Total Carried Forward (cu. yds./tons):

Total Carried Forward and This Page (cu. yds./tons):

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator's US EPA ID No. _____		Manifest Document No. <u>13LUSG-00A2</u>		22. Page <u>2</u> of <u>2</u>	
23. Generator's Name and Mailing Address <u>Massachusetts Dept of Env Protection</u>						L. State Manifest Document Number _____	
						M. State Generators ID _____	
						N. State Transporters ID <u>DWH 160007631</u>	
						O. Transporters Phone <u>781-849-1880</u>	
24. Transporter <u>3</u> Company Name <u>Clean Harbors Env. Services Inc</u>		25. US EPA ID Number <u>MAD039322250</u>		P. State Transporters ID _____		Q. Transporters Phone _____	
26. Transporter _____ Company Name _____		27. US EPA ID Number _____					
28. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				29. Containers	30. Total	31. Unit	32. Waste No.
				No.	Quantity	Wt/Vol	
a. <input type="checkbox"/> HM							
b. <input type="checkbox"/>							
c. <input type="checkbox"/>							
d. <input type="checkbox"/>							
e. <input type="checkbox"/>							
f. <input type="checkbox"/>							
g. <input type="checkbox"/>							
h. <input type="checkbox"/>							
i. <input type="checkbox"/>							
S. Additional Descriptions for Materials Listed Above				T. Handling Codes for Wastes Listed Above			
32. Special Handling Instructions and Additional Information							
33. Transporter <u>2</u> Acknowledgement of Receipt of Materials				Date			
Printed/Typed Name <u>James Wideman</u>				Signature <u>[Signature]</u>		Month Day Year <u>08/26/03</u>	
34. Transporter _____ Acknowledgement of Receipt of Materials				Date			
Printed/Typed Name _____				Signature _____		Month Day Year _____	
35. Discrepancy Indication Space							

BILL OF LADING (pursuant to 310 CMR 40.0030)

Release Tracking Number

SUMMARY SHEET 1 **OF** 1

	-	N/A
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K. SUMMARY OF SHIPMENTS:

[illegible]

SUMMARY SHEET TOTAL SHIPPED:
BILL OF LADING TOTAL SHIPPED (only if different):



BILL OF LADING (pursuant to 310 CMR 40.0030)

Release Tracking Number

SUMMARY SHEET

☐ - ☐ N/A

L. ACKNOWLEDGEMENT OF RECEIPT OF REMEDIATION WASTE AT RECEIVING FACILITY OR TEMPORARY STORAGE LOCATION:

Receiving Facility/Temporary

Location Representative (print): CLEAN HARBORS BALTIMORE

Title: Compliance Officer

Signature: Robert C. McInerney

Date: 07/02/03

M. ACKNOWLEDGEMENT OF SHIPMENT AND RECEIPT OF REMEDIATION WASTE BY PERSON CONDUCTING RESPONSE ACTION ASSOCIATED WITH THIS BILL OF LADING:

I certify under penalties of law that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained herein is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for wilfully submitting false, inaccurate, or incomplete information.

Signature: Jean Soltys

Date: 9/18/03

Name of Person (print): Jean Soltys



STATE OF MAINE

NO846462

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law but may be required by State Law.
3. Generator's Name and Mailing Address Clean Harbors Andover LLC Attn: Jean Soltys 221 Sutton Street North Andover, MA 01845		4. Generator's Phone (978) 883-1002		A. State Manifest Document Number ME A 183814	
5. Transporter 1 Company Name CLEAN HARBORS ENV SERVICES INC		6. US EPA ID Number MA003937050		B. S.G.I. (Gen. Site Address) 300 Canal Street Lawrence, MA 01840	
7. Transporter 2 Company Name CLEAN HARBORS ENV SERVICES INC		8. US EPA ID Number MA003937050		C. S.T.I. (Lic. Plate #) 25067601K	
9. Designated Facility Name and Site Address Clean Harbors Env Services Inc 37 Rummery Road So Portland, ME, 04106		10. US EPA ID Number ME0000072192		D. Transporter's Phone 781 899-1800	
				E. S.T.I. (Lic. Plate #) ME 614189	
				F. Transporter's Phone 781 899-1800	
				G. State Facility's ID 9230019999	
				H. Facility's Phone 207 799-8111	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. NON DOT REGULATED MATERIAL, NON DOT HAZARDOUS, NONE, NONE		No. 005	Type T/F	015000	G
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. (L) wash water		Interim Final Interim Final			
b.		a. 502 b.			
c.		c. T34 d.			
15. Special Handling Instructions and Additional Information		24 HOUR EMERGENCY # (800) 483-3718			
11a. CH30550					
Point of Departure:					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name Toni P. K.		Signature Toni P. K.		Month Day Year 08 21 03	
17. Transporter 1 Acknowledgment or Receipt of Materials		Signature Toni P. K.		Date 08 21 03	
18. Transporter 2 Acknowledgment or Receipt of Materials		Signature Michael McKay		Date 08 30 03	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name Allen Price		Signature Allen Price		Date 09 03 03	

FACILITY MAILED TO GENERATOR

ME A 183814

In the event of a spill, contact the National Response Center, U. S. Coast Guard 1-800-424-8802. For spill with... Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-482-0777.



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS MATERIALS
One Winter Street Boston, Massachusetts 02108

CAN 35-077

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MA0005604447	Manifest Document No. 25499		2. Page 1 of	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address Picking Address: 300 Canal St. Lawrence, MA 01840 221 Sutton St. North Andover, MA 01845 CLEAN HARBORS ANDOVER LLC					A. State Manifest Document Number MA Q 325499			
4. Generator's Phone (978) 683-1000					B. State Gen ID SAME			
5. Transporter 1 Company Name Clean Harbors Env Services Inc					C. State Trans. ID MA55985			
6. US EPA ID Number MA0034322250					D. Transporter's Phone (781) 849-1800			
7. Transporter 2 Company Name					E. State Trans. ID			
8. US EPA ID Number					F. Transporter's Phone ()			
9. Designated Facility Name and Site Address CLEAN HARBORS OF BIAWATER, INC 1 Hill Ave BIAWATER, MA 02184					G. State Facility's ID NOT REQUIRED			
10. US EPA ID Number MA0053452637					H. Facility's Phone (781) 849-1807			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)					12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. NON DOT REGULATED MATERIAL, NON DOT HAZARDOUS NONE, NONE					CO.	6M	20 Y	NONE MA99
b.								
c.								
d.								
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)					K. Handling Codes for Wastes Listed Above			
a. (S)					a.			
b.					b.			
c.					c.			
d.					d.			
15. Special Handling Instructions and Additional Information HA 3256					IN EMERGENCY, CALL CHEM 1-800-645-8265			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.								
Printed/Typed Name					Signature		Date Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Charles Fitzgerald					Signature [Signature]		Date Month Day Year 08/28/03	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name					Signature		Date Month Day Year	
19. Discrepancy Indication Space								
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.								
Printed/Typed Name Richard Hamilton					Signature [Signature]		Date Month Day Year 08/28/03	



DEPARTMENT OF ENVIRONMENTAL PROTECTION

Hazardous Waste MANIFEST SECTION, State House, Station 17, Augusta, ME 04333



Form Approved. OMB No. 2050-0039.

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MAID 0100804447		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law but may be required by State Law.	
3. Generator's Name and Mailing Address Clean Harbors Andover LLC 221 Sutton Street North Andover, MA 01845 4. Generator's Phone (978) 883-1002						6. US EPA ID Number MAID 039322250		A. State Manifest Document Number ME A 183818	
5. Transporter 1 Company Name Clean Harbors Env Services Inc						8. US EPA ID Number MAID 039322250		B. S.G.I. (Gen. Site Address) 300 Canal St. Lawrence MA	
7. Transporter 2 Company Name CLEAN HARBORS ENV SERVICES INC						10. US EPA ID Number MEID 0100804447		C. S.T.I. (Lic. Plate #) ME. 619001	
9. Designated Facility Name and Site Address Clean Harbors Env Services Inc 37 Rumney Road So Portland, ME, 04108						12. Containers No. Type 001 TP 00330 G		D. Transporter's Phone 781 849-1800	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. NON DOT REGULATED MATERIAL, NON DOT HAZARDOUS, NONE, NONE						13. Total Quantity 00330		E. S.T.I. (Lic. Plate #) ME 625970	
b.						14. Unit Wt/Vol G		F. Transporter's Phone 781-849-1800	
c.								G. State Facility's ID 9230019999	
d.								H. Facility's Phone 207 799-8111	
J. Additional Descriptions for Materials Listed Above (L) wash water						K. Handling Codes for Wastes Interim Final a. S02 c. T89		Listed Above Interim Final b. d.	
15. Special Handling Instructions and Additional Information 11a. CH30560						24 HOUR EMERGENCY # (800) 483-3718			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and all applicable state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						Point of Departure:			
Printed/Typed Name Jean Soltyz						Signature [Signature]		Month Day Year 10/8/29/03	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name EDWARD W. DAVIS						Signature Edward W. Davis		Month Day Year 10/8/29/03	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name WILLIAM H PIERCE						Signature William H Pierce		Month Day Year 10/9/29/03	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						Date Month Day Year 10/11/03			
Printed/Typed Name Nicholas [Signature]						Signature [Signature]		Month Day Year 10/11/03	

In the event of a spill, contact the National Response Center, U. S. Coast Guard 1-800-424-8802. For spill within Maine, contact DEP, Oil and Hazardous Materials Control at 1-800-482-0777.



DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS MATERIALS
One Winter Street Boston, Massachusetts 02108

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.		2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Clean Harbors Andover LLC Attn: Jean Soltyz 221 Sutton St. No. Andover, MA 01845		MAD00060447	43119		A. State Manifest Document Number MA Q 343119		
4. Generator's Phone ()		5. Transporter 1 Company Name Clean Harbors Environmental Serv. Inc.		6. US EPA ID Number MAD039322250	B. State Gen ID 300 Canal Street, Lawrence MA		
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Trans. ID PUT 3393 OH			
9. Designated Facility Name and Site Address Clean Harbors of Braintree, Inc. 1 Hill Ave. Braintree, MA 02184		10. US EPA ID Number MAD053452637		D. Transporter's Phone (781) 849-1800			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. Non DOT Regulated material		1. CM		20	Y	MA99	
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)				K. Handling Codes for Wastes Listed Above			
a. debris 543256				a. 5161			
b.				b.			
c.				c.			
d.				d.			
15. Special Handling Instructions and Additional Information 24 hr emergency : 800-483-3718							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name Jean Soltyz				Signature [Signature]		Date Month Day Year 08 22 03	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Sean Leary				Signature [Signature]		Date Month Day Year 09 02 03	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		Date Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name Keith Dwyer				Signature [Signature]		Date Month Day Year 09 09 03	